

Some kids are going to get hit with the bullet in the chamber and have their lives permanently affected."

A hot question among baby-boomer parents today is: "What can I say to my kids if I smoked pot when I was younger?" If confronted by your children, be open and honest. Author Peggy Noonan, who experimented with pot in college, offers this advice to other parents: "You did it, and it was wrong—be an adult and say so. It's one thing to be ambivalent about your own choices. It's another to be ambivalent about your child's."

To every parent the U.S. Department of Education offers these words of advice: "Setting rules for a child is only half the job. Parents must be prepared to enforce the penalties when the rules are broken." Experts recommend:

Be specific. Make sure your child knows what the rules are, the reasons for them and what the consequences will be if they're broken. When Mark and Danna Allenbach neared driving age, their father told them, "If either of you ever drink and drive, you can say goodbye to anything to do with our cars. There will be no second chances. Once, and it's over. You're too important to lose."

Be consistent. "Just saying no" can be as hard for parents as it is for a kid. Sometimes caving in to a persistent request is the path of least resistance. But if the answer to a request should be no, stick to it.

Be reasonable. Don't add new consequences after a rule is broken, and make sure the punishment is appropriate. "Consequences are most effective when they fit the infraction," says Olive O'Donnell, education director of the National Family Partnership, a substance-abuse prevention group in St. Louis. "Grounding may be appropriate for a broken curfew, but it's meaningless when applied to something such as not making the bed."

Keep Listening. According to the Partnership for a Drug-Free America, it's important that parents "don't do all the talking." If you listen carefully to your children and read between the lines, you can learn a lot about what they think about drugs—and help them avoid the pitfalls.

To keep children away from drugs, one thing is clear: schools, community, religious institutions, the police—all of them can help. But no one can replace the family.

Lauri and Ted Allenbach invested a lot of time fulfilling their commitment to raise their children to be drug-free. It has paid off—neither child has been involved with alcohol or drugs. "You have to have control over your life," says Danna, now a freshman at James Madison University in Harrisonburg, VA. Mark, a high-school sophomore, has no interest in drugs. "I'm pretty confident," he says. "I don't think I'm going to fold."

The work that parents do is critical. Experts agree it is highly likely that youngsters who don't do drugs as teens will not do drugs as adults.

Talk to your children. Listen to them. Set standards of right and wrong. Keep in mind that they learn by example. Love, support and praise them so they will have a sense of self-worth. Keep them busy. Be involved with—and on top of—their lives. Educate yourself about drugs.

Remember, don't let your silence be acceptance.

## TRIBUTE TO EDWARD A. CARTER

### HON. EDOLPHUS TOWNS

OF NEW YORK

IN THE HOUSE OF REPRESENTATIVES

Thursday, June 5, 1997

Mr. TOWNS. Mr. Speaker, I rise today to pay tribute to Edward A. Carter, a man who believes in working within his community as though it is his home, and with his neighbors as though they are his family. Mr. Edward A. Carter was born in Richmond, VA. At the age of 2 he moved to the Bensonhurst section of Brooklyn where he attended public school and graduated with honors.

Mr. Carter enlisted in the military services in 1950 and served in the 715th AA Battalion. After receiving his B.S. degree at LaSalle University, Mr. Carter enlisted in the U.S. Air Force and served overseas. Edward Carter received several commendations of merit and four honorable discharges, one from the U.S. Army, and three from the U.S. Air Force.

After retiring from the Armed Forces, he moved to the Fort Greene section of Brooklyn where he has participated in many social, civic, and fraternal organizations. As the executive director and founder of the Fort Greene Youth Patrol Inc., Mr. Carter serves the needs of hundreds of inner city youth, young adults, and senior citizens. As a founding board member of the Brooklyn Navy Yard, he served as chairman of the Parks and Public Safety Committee for 20 years. Mr. Carter is also the co-founder and vice chairman of the Fort Greene Senior Citizens Council which serves 900 or more senior citizens, Greene Community Corp.

Mr. Carter is extremely active in veterans affairs and simultaneously works with Cumberland Neighborhood Family Clinic and the Veteran Association. Mr. Carter is a 20-year board member for the Selective Services No. 145 in Brooklyn, and a member of the American Legion.

Mr. Speaker, I ask you to join me in saluting Mr. Edward A. Carter for his outstanding contribution to the Armed Forces and to the people of the Fort Greene community in Brooklyn.

## TRIBUTE TO REV. JAMES L. GLEESE

### HON. HAROLD E. FORD, JR.

OF TENNESSEE

IN THE HOUSE OF REPRESENTATIVES

Thursday, June 5, 1997

Mr. FORD. Mr. Speaker, I rise today to ask my colleagues to remember and pay tribute to the late Reverend James L. Gleese. Reverend Gleese's recent passing will result in a tremendous void in our community. He was a selfless and giving man, seeking to serve rather than be served, to praise rather than be praised, and to glorify rather than be glorified.

After entering the ministry in 1945, Reverend Gleese acted in the benevolent service of his fellow man. In 1954, he founded and operated the Beale Street Mission, which housed homeless men, giving them counseling, employment assistance, and spiritual guidance. He devoted his evenings to the Youth For Christ Ministry, an outreach to young people in the Beale Street area of Memphis. Reverend Gleese led the A.M.E.

Church as presiding elder of the North Memphis district. Through his vision, hard work, and determination, he founded Pearl Street A.M.E. Church and West Point A.M.E. Church. He also fulfilled his service to the greater community by involving himself extensively in civic affairs.

Reverend Gleese will be remembered as a noble spirit and fearless warrior, one who stood tall among his peers and who stood firm in his beliefs. His work in the church and the community and his devotion to his family and friends will be his enduring legacy. Mr. Speaker, I ask my colleagues join me in honoring and remembering this paragon of inspiration and decorated soldier of the cloth, the late Reverend James L. Gleese.

## INTRODUCTION OF LEGISLATION TO RAISE THE INDIVIDUAL LIFETIME CAP ON HEALTH INSURANCE

### HON. ANNA G. ESHOO

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Thursday, June 5, 1997

Ms. ESHOO. Mr. Speaker, I'm pleased today to introduce legislation to raise the individual cap on lifetime health insurance payments to \$10 million for group insurance coverage.

The current standard lifetime cap is like a dinosaur from Jurassic Park—a relic from another age that can still be hazardous to those who get in its way. A million dollar cap was fine when it was established in the early 1970's. But inflation has sent medical costs skyrocketing and forced thousands of Americans to bump up against that payment ceiling. As a result, some patients who desperately require medical attention are plowing through their savings and ending up on public assistance just to pay their doctor bills. Since anyone can be hit at any time with a disabling disease or traumatic injury—resulting from everything from AIDS to car accidents—this initiative will benefit a wide range of people.

The legislation would amend the Employee Retirement Income Security Act and the Public Health Service Act to raise the lifetime cap from the typical existing limit of \$1 million to \$5 million in 1998 and \$10 million in 2002. It would exclude employers with fewer than 20 workers. Over 150 national health-related non-partisan groups have endorsed the measure.

At present, approximately one quarter of employer-sponsored health plans have no lifetime limit. Unfortunately, many people don't realize that their health insurance policies have a lifetime cap that could be easily exceeded if a catastrophic illness or injury occurred. If the industry standard of a \$1 million cap were indexed for medical inflation since 1970, it would be worth between \$10 million and \$15 million today. The American Academy of Actuaries found that raising the lifetime cap on large employers would likely require a premium increase of only \$7 per year per adult to cover between \$500,000 and \$1 million.

According to the accounting firm of Price Waterhouse, 1,500 people exhaust their lifetime payments under their private health insurance each year and have no choice but to impoverish themselves and their families to qualify for Medicaid. The firm estimates that an additional 10,000 people will reach their lifetime